

Unannounced Care Inspection Report 3 March 2020



Bayview Resource Centre

Type of Service: Day Care Service
Address: 11-13 Ballyholme Road, Bangor, BT20 5JH
Tel No: 02891270352 Option 7
Inspector: Fionnuala Breslin

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and areas for improvement that exist in the service. The findings reported on are those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not exempt the service provider from their responsibility for maintaining compliance with legislation, standards and best practice.

1.0 What we look for



2.0 Profile of service

Bayview Resource Centre is a purpose-built Day Care Setting with places approved for 60 adults. Service users may have assessed needs in one or more categories of disability, infirmity, dementia, illness, sensory impairment or addiction. Programmes are arranged throughout each week to meet the needs of people in their allocated groups.

3.0 Service details

Organisation/Registered Provider: South Eastern HSC Trust	Registered Manager: Stacey Boyd (Acting)
Responsible Individual: Seamus McGoran	
Person in charge at the time of inspection: Stacey Boyd	Date manager registered: Not applicable
Number of registered places: 60	

4.0 Inspection summary

An unannounced inspection took place on 3 March 2020 from 11.30 hours to 15.45 hours.

This inspection was underpinned by The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003, The Day Care Setting Regulations (Northern Ireland) 2007, The Day Care Settings Minimum Standards, 2012 and The Northern Ireland Social Care Council (Social Care Worker Prohibition) and Fitness of Workers (Amendment) Regulations (Northern Ireland) 2017.

As a public-sector body RQIA have a duty to respect, protect and fulfil the rights that people have under the Human Rights Act 1998 when carrying out our functions. In our inspections of day care services, we are committed to ensuring that the rights of people who receive services are protected. This means we will be seeking assurances from providers that they take all reasonable steps to promote people's rights. Users of day care services have the right to expect their dignity and privacy to be respected and to have their independence and autonomy promoted.

One area requiring improvement was identified in relation to evidence of Access NI checks.

Evidence of good practice was found in relation to staff registrations with the Northern Ireland Social Care Council (NISCC) and staff training.

The findings of this report will provide the manager of the day centre with the necessary information to assist them to fulfil their responsibilities, enhance practice and service users' experience.

4.1 Inspection outcome

	Regulations	Standards
Total number of areas for improvement	1	0

This inspection resulted in one area for improvement being identified. Findings of the inspection were discussed with the manager, as part of the inspection process and can be found in the main body of the report.

Enforcement action did not result from the findings of this inspection.

4.2 Action/enforcement taken following the most recent care inspection dated 6 March 2019

Other than those actions detailed in the QIP no further actions were required to be taken following the most recent inspection on 6 March 2019.

5.0 How we inspect

Prior to inspection we reviewed the information held by RQIA about this day care service. This included the previous inspection report, the returned QIP, notifiable events, and written and verbal communication received since the previous care inspection.

During our inspection we focused on contacting the service users, their relatives and staff to find out their views on the service.

The inspector ensured that the appropriate staff checks were in place before staff work with service users. Recruitment records specifically relating to Access NI and NISCC registration were requested for review.

A poster was provided for staff detailing how they could complete an electronic questionnaire. There were no responses received.

Ten questionnaires were also provided for distribution to the service users and their representatives; three responses were returned within the timeframe for inclusion; analysis and comments are included within the report.

RQIA information leaflets 'How can I raise a concern about an independent health and social care service' were also provided to be displayed appropriately in the setting.

During the inspection the inspector met with eight service users and three staff. There were no visiting Health and Social Care Trust (HSCT) professionals or relatives present at the time of inspection.

An area for improvement identified at the last care inspection was reviewed and assessment of compliance recorded as met.

6.0 The inspection

Review of areas for improvement from the last care inspection dated 6 March 2019		
Action required to ensure compliance with the Day Care Settings Minimum Standards, 2012		Validation of compliance
Area for improvement 1 Ref: Standard 21.3 Stated: First time	The registered person shall ensure that the timescales for training are clearly stated and are consistent with the relevant legislation and the care standards.	Met

	<p>Action taken as confirmed during the inspection:</p> <p>The training records of all staff were reviewed and confirmed that the timescales for training were clearly stated and were consistent with the relevant legislation and the care standards. Training records were available and up to date at the time of inspection. There was evidence of audit and forward planning for future training. The staff spoken to were knowledgeable and well trained. They said they were encouraged by the manager to attend mandatory and other types of specialist training. There is a day care worker trained as a dementia champion working with the service users with dementia who attend the centre's Butterfly Suite.</p>	
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6.1 Inspection findings

The inspector reviewed four staff recruitment records relating to NISCC registrations and found them to be satisfactory. A spot check was completed by the manager on the NISCC web portal and the four staff were registered. There was also a system in place to ensure that registrations were monitored on a regular basis.

The manager was unable to provide the exact information regarding the details of Access NI checks which were completed by the Trust's Business Services Organisation (BSO)/ human resources department. The manager informed the inspector that the BSO notified the manager regarding the successful completion of pre-employment checks including Access NI checks before the person commenced employment. The manager provided a letter from BSO outlining the checks carried out. However, this is not sufficient evidence; the day care setting must maintain evidence of the date of the Access N.I. check and the Access N.I reference number prior to a staff member commencing duty or, will have on record in the staff file, a letter of confirmation from BSO that this record has been checked prior to the date of commencement of employment. There will be an area for improvement in this regard.

The inspector also reviewed two notifications received by RQIA from the day centre since the last inspection on 6 March 2019. These had been dealt with appropriately and no further action is required. The inspector noted that the manager had also reported all incidents to the relevant HSCT professionals.

The inspector observed service users taking part in various activities and there was a pleasant and relaxed atmosphere between staff and service users. Feedback from service users and staff indicated that there was also involvement from the wider community in relation to attendance at the local recreational centre for exercise classes.

The analysis of three service users/relatives questionnaires received within the time frame of the inspection is as follows: Two responses indicated that they were very satisfied with the quality of care in relation to how safe, effective, compassionate and well led the service was. One response indicated that they had specific issues with some aspects regarding quality of care but they were very satisfied with how well the service was led.

These issues which had been raised with the inspector during inspection were discussed with the manager during feedback.

Service users provided positive comments regarding the care and support they had received:

Service users' comments:

- "Yes I feel safe here."
- "I like all these people here."
- "It is a good atmosphere and I love coming here. It gets me out of the house where I live alone."
- "Yes I feel very safe here there are always staff to help."
- "The staff are very good and caring."
- "I've seen the staff help people who need more help than me."
- "Yes the place is well run."
- "I would go to a member of staff if I had a concern."
- "I take part in the committee."

Staff comments

- "Staff are knowledgeable regarding the needs of service users."
- "I have not seen any restrictive practices; there has been a good standard of human rights which are central to the person centred approach to care."
- "All my mandatory training is up to date."
- "I have done specialist training as well as mandatory training and have been encouraged to do this."
- "The staff here are well trained and know what they are doing."
- "I think the care here is amazing, I wish I had come here to work years ago."
- "We do weekly fire safety checks and random fire drills during the year."
- "We take in a register to every class in case of fire so we know where everybody is."
- "Service user reviews are carried out, annually within the correct timeframe required."
- "I attended a meeting this morning regarding a new risk assessment tool for falls prevention to work alongside the current manual handling risk assessment to keep people safe."
- "Activities are very engaging mentally and physically, the structure of the classes is excellent."
- "There is a real relationship established between staff and the service user. I get a real sense of the therapeutic value of this."
- "Staff go the extra mile here...you have to know your service users well to establish trust this is built up through life story work, reminiscence, chatting to the service user and their families. It helps to build a connection with them."
- "I have read the policies and procedures which are up to date regarding review."
- "Adult safeguarding policy and procedure reflects the current regional legislation."
- "We get a team brief once a month to discuss concerns."
- "The manager is doing great."
- "The manager is approachable."
- "I get supervision every two months by the day care workers and every four months by the manager."
- "There is very much an open door policy here."
- "Supervisions are carried out monthly for day care works and an annual appraisal for all staff is carried out by the manager."

Areas of good practice

Evidence of good practice was found in relation to the regular monitoring of NISCC registrations and there was a robust system in place for the governance of staff training.

Areas for improvement

There was one area for improvement as a result of this inspection.

	Regulations	Standards
Total number of areas for improvement	1	0

7.0 Quality improvement plan

Areas for improvement identified during this inspection are detailed in the QIP. Details of the QIP were discussed with Stacey Boyd, manager, as part of the inspection process. The timescales commence from the date of inspection.

The registered provider/manager should note that if the action outlined in the QIP is not taken to comply with regulations and standards this may lead to further enforcement action including possible prosecution for offences. It is the responsibility of the registered provider to ensure that all areas for improvement identified within the QIP are addressed within the specified timescales.

Matters to be addressed as a result of this inspection are set in the context of the current registration of the agency. The registration is not transferable so that in the event of any future application to alter, extend or to sell the premises RQIA would apply standards current at the time of that application.

7.1 Areas for improvement

Areas for improvement have been identified where action is required to ensure compliance with the Day Care Settings Regulations (Northern Ireland) 2007 and the Day Care Settings Minimum Standards, 2012.

7.2 Actions to be taken by the service

The QIP should be completed and detail the actions taken to address the areas for improvement identified. The registered provider should confirm that these actions have been completed and return the completed QIP via Web Portal for assessment by the inspector.

	Regulations	Standards
Total number of areas for improvement	1	0

Quality Improvement Plan

Action required to ensure compliance with the Day Care Settings Regulations (Northern Ireland) 2007.

<p>Area for improvement 1</p> <p>Ref: Regulation 21. (1) (a)(b), schedule 2 (a)(b)</p> <p>Stated: First time</p> <p>To be completed by: Immediate and ongoing</p>	<p>The registered person or manager shall not employ a person to work in the day care setting unless-</p> <p>(a) The person is fit to work in the day care setting;</p> <p>(b) Subject to paragraph (3), he has obtained in respect of that person the information and documents specified in Schedule 2</p> <p>Schedule 2</p> <p>(a) Where a certificate is required for a purpose which is prescribed by regulations under section 113B of that Act, an enhanced criminal record certificate issued under that section; or</p> <p>(b) In any other case, a criminal record certificate issued under section 113A of that Act.</p> <p>This relates specifically to evidence of the date of the Access N.I. check and the Access N.I reference number prior to a staff member commencing duty or, will have on record in the staff file, a letter of confirmation from BSO that this record has been checked prior to the date of commencement of employment.</p> <p>Ref: 6.1</p>
	<p>Response by registered person detailing the actions taken:</p> <p>As part of the recruitment process, BSO email the Recruiting Manager to confirm that pre employment checks have been completed and are satisfactory. This email will be placed in staff file.</p>

Please ensure this document is completed in full and returned via Web Portal



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